

QUIT CLAIM DEED

APN: 005-690-08

BOOK 366 PAGE 044
OFFICIAL RECORDS
RECORDED AT THE REQUEST OF
Mouricio G. Zwang
2003 SEP 30 AM 8:49

EUREKA COUNTY NEVADA
M.N. REBALEATI, RECORDER
FILE NO. FEES 14.00

182572

RECORDING REQUESTED BY AND I. TAX STATEMENT TO

Name: **MOURICIO G. ZANG**
Address: **37045 LITTLEROCK RANCHOS RD**
City/State/Zip: **LITTLEROCK, CA 93543**

THIS INDENTURE WITNESS That the GRANTOR(S): **EUREKA COUNTY**
TREASURER, TRUSTE (Frank & Imogene Feola) for and in consideration of
FIVE THOUSAND ONE HUNDRED AND 00/100 Dollars (**\$ 5100.00**) do hereby QUIT
CLAIM the right, title and interest, if any, which GRANTOR(S) may have in all that real property,
the receipt of which is here acknowledged, to the GRANTEE(S): **MOURICIO G. ZWANG**

whose address
is (if applicable): **37045 LITTLEROCK RANCHOS RD**, situate in the
City of **LITTLEROCK**, County of _____, State of **CALIFORNIA**.

All that certain property in County of Eureka, State of Nevada bounded and described as follows:
(Set forth legal description)

TOWNSH30 NORTH, RANGE 50 EAST, MDB&M
SECTION SW4NW4

Together with all and singl hereditament and appurtenances thereunto belonging or in any way
appertaining to. In Witness hereof, I/We have hereunto set my hand/our hands on


SEPT. 29, 2003

Frances E. Gale
Signature of Grantor
Frances E. Gale, Eureka Coy Treasurer

STATE OF NEVADA)
COUNTY OF EUREKA)

This instrument was knowned before me on (date) **Sept. 29, 2003**
By (person(s) appearing before me: public) **Frances E Gale**

Kimberly Todd
Notary Public
My Commission expires: **1/3/07**

 KIMBERLY L. TODD
Notary Public - State of Nevada
Appointment Recorded in Eureka County
No: 03-79670-8 - Expires January 3, 2007

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STATE OF NEVADA DECLARATION OF VALUE

FOR RECORDERS OPTIONAL USE ONLY	
Document/Instrument#:	182572
Book:	366 Page: 044
Date of Recording:	9/30/03
Notes:	

1. Assessor Parcel Numt (s)

- a) 005-690-08
- b) _____
- c) _____
- d) _____

2. Type of Property:

- | | | | |
|--|--------------|-----------------------------|-----------------|
| a) <input checked="" type="checkbox"/> | Vacant Land | b) <input type="checkbox"/> | Single Fam Res. |
| c) <input type="checkbox"/> | Condo/Twnhs | d) <input type="checkbox"/> | 2-4 Plex |
| e) <input type="checkbox"/> | Apt. Bldg. | f) <input type="checkbox"/> | Comm'l/Ind'l |
| g) <input type="checkbox"/> | Agricultural | h) <input type="checkbox"/> | Mobile Home |
| i) <input type="checkbox"/> | Other | | |

3. Total Value/Sales Pri of Property:

Deed in Lieu of Foreclose Only (value of property) \$ 5100⁰⁰
 Transfer Tax Value: \$ _____
 Real Property Transfer Tax Due: \$ 7.15

4. If Exemption Claimed:

- a. Transfer Tax Exempt, per NRS 375.090, Section: _____
- b. Explain Reason for Exemption: _____

5. Partial Interest: Percentage being transferred: _____ %

The undersigned declares and acknowledges, under penalty of perjury, pursuant to NRS 375.060 and NRS 375.110, that the information provided is correct to the best of their information and belief, and can be supported by documentation if called upon to substantiate the information provided herein. Furthermore, the disallowance of any claimed exemption, or other determination of additional tax due, may result in a penalty of 10% of the tax due plus interest at 1% per month.

Pursuant to NRS 375.030, Buyer and Seller shall be jointly and severally liable for any additional amount owed.

Signature Frances Gale Capacity Treasurer
 Signature _____ Capacity _____

SELLER (GRANTOR) INFORMATION

(REQUIRED)

Print Name: Frances Gale
 Address: P O Box 6
 City: Eureka, N 89316
 State: ZI

BUYER (GRANTEE) INFORMATION

(REQUIRED)

Print Name: _____
 Address: _____
 City: _____
 State: _____ Zip: _____

COMPANY/PERSON REQUESTING RECORDING

(REQUIRED IF NOT THE SELLER OR BUYER)

Print Name: _____ Escrow # _____
 Address: _____
 City: _____ State: _____ Zip: _____